



LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

Kimberly A. Foster
Executive Director

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ADELINA SORKIN, LCSW/ACSW, CHAIR
DR. HARRIETTE F. WILLIAMS
TRULA J. WORTHY-CLAYTON, VICE CHAIR

APPROVED MINUTES

The General Meeting of the Commission for Children and Families was held on Monday, **July 7, 2008**, in room 739 of the Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles. **Please note that these minutes are intended as a summary and not as a verbatim transcription of events at this meeting.**

COMMISSIONERS PRESENT (Quorum Established)

Carol O. Biondi
Patricia Curry
Susan Friedman
Helen Kleinberg
Steven M. Olivas
Tina Pedersen
Martha Trevino Powell
Sandra Rudnick
Adelina Sorkin
Trula J. Worthy-Clayton

COMMISSIONERS ABSENT (Excused/Unexcused)

Ann Franzen
Dr. La-Doris McClaney
Reverend Cecil Murray
Stacey Savelle
Dr. Harriette F. Williams

CALL TO ORDER

The meeting was called to order by Nina Sorkin, Chair.

APPROVAL OF AGENDA

The agenda for the July 7, 2008 meeting was unanimously approved.

Prior to the start of the Focus Group, each Commissioner was asked to complete a demographic profile and consent for participation.

OVERVIEW/PEI PLANNING PROCESS

Tronie Rifkin informed the Commission of the purpose of the Focus Group. The Commission was also informed that the responses they give should reflect their individual views/perspectives from the area/communities they represent. Rules were discussed and established (confidentiality and one person at a time will speak). She informed the Commission the facilitators have been contracted as an independent body by the Los Angeles County Department. The information will be utilized in the decision making process for DMH MHS PEI in the SPA's that will take place during the fall.

Commissioners were asked questions regarding the DMH MHSA PEI Process. The facilitator informed the Commission that the questions were developed by the State, and are utilized with all of the Focus Groups. Commissioner Trevino Powell asked if the questions were standardized and used for all Focus Groups, she suggested having the questions pre-printed in large print for easier visibility.

INTRODUCTIONS

Commissioners, Focus Group facilitator's and member of the public provided self-introductions. Tronie Rifkin stated for the record that the meeting is being tape recorded and that each Commissioner has signed a consent which reflects that participation is voluntary.

DMH MHSA PEI PLANNING PROCESS

Commissioners were asked about their level of participation in the DMH MHSA PEI Process. Commissioner Biondi stated she participated in the MHSA CSS process, and has been involved with PEI for Probation "cross-over youth". Commissioner Friedman has not taken part in the process. Commissioner Kleinberg stated she is a delegate for the Commission to the PEI process and that she also participated in the advisory group that was formed to create the process for the forums. Commissioners Trevino Powell, Sorkin, Worthy-Clayton, Pedersen, Olivas, and Rudnick have not participated in the process. Commissioner Curry mentioned she participated as an Alternate Delegate and as a Delegate for the System Leadership Team.

PARTICIPANT'S ORGANIZATIONAL AFFILIATION

Commissioners were asked to describe the constituency group they represent. Commissioners concurred that they represent a countywide constituency.

COMMUNITY MENTAL HEALTH NEEDS

Commissioners were asked to refer to the sheet titled Priority Populations and Key Mental Health Needs and identify the populations that each of them represents. The Commission concurred that they represent all six priority populations. Commissioner Rudnick added that she is interested in groups experiencing the onset of psychiatric illness and the psychotropic drugs that are used. Commissioners were told that it is alright to focus on all six populations. In addition, Commissioner Pedersen added that her work outside the Commission involves working with children with developmental disabilities and special needs, and notices there is not a specific category for this group.

Commissioners were asked to refer back to the sheet titled Priority Populations and Key Mental Health Needs and identify the key mental health needs. Commissioner Olivas, stated that all of the needs were significant and of equal concern; and the other Commissioners concurred.

Commissioners were instructed to prioritize the top three mental health needs. The Commissioners were informed that the priority needs were established by the State of California for the Mental Health Services Act. Commissioner expressed concern that only one item specifically mentioned children. Several of the Commissioner and the facilitator discussed the fact that even though the others do not specifically mention children, the issues do affect children as many of the adults have children. Commissioner Worthy-Clayton stated that much of what happens to children is the consequence of something that may have happened to adults that are affiliated with the children, and that adults have their programs already and generally do well in those programs. Commissioner Curry added that keeping families together means working with all family members, including grandparents as well. Some children live with their grandparents, and families encompass all ages, sexes, and walks of life. Commissioner Sorkin mentioned the disparities such as parents recommended for services for which they have no insurance coverage, and how this leads to a no-win situation for them. She further indicated that many services are not accessible or not available in the primary language of the consumer. It was also felt that issues 1-Underserved Cultural Populations and 3-Children/Youth in Stressed Families are key. Access issues were brought up by Commissioner Kleinberg in that support needs to be taken to the location where the support is needed, such as schools, pre-schools, and medical care facilities. Commissioners were asked to prioritize from the provided listing. As a group, the consensus was Children/Youth in Stressed Families as the first priority; Underserved Cultural Populations as the second priority; and Individuals Experiencing Onset of Serious Psychiatric Illness as the third priority.

PREVENTION AND EARLY INTERVENTION SERVICES

Commissioners were asked about the types of problems that they see occurring in their communities. Disruptive behavior by children in the classroom is a problem mentioned by Commissioner Trevino Powell. Commissioner Biondi mentioned the total lack of services for the transitional-age youth coming out of probation. Commissioner Worthy-

Clayton added that there are inadequate services for Probation/DCFS, and this is leading to children dying, children committing suicide, children living as part of the homeless population, and children ending up in prison. Commissioner Sorkin talks about how the lack of language competency in staff presents a barrier to families. Commissioner Biondi mentions how children are asked to translate for staff even though there are abusive and sensitive issues. Commissioner Curry discusses the lack of continuity for receiving services and sharing information, and the duplication of effort for reassessments. In addition, Commissioner Curry talks about the lack of a comprehensive record-sharing automated system. It was also stated that the lack of total integration and coordination, and an increased severity of needs. Commissioners Kleinberg and Curry talk about how the delay in PEI results in the criminalization of MH children and youth, and that it gets to a crisis situation. Commissioner Pedersen mentions how children are mislabeled, as well as there being a limited access for disabled children. Commissioner Trevino Powell mentions having seen broken families and stress, and how these factors impact families.

Commissioners were asked to discuss prevention services or resources that are currently available. Commissioners Sorkin, along with Commissioner Pedersen, responded by saying very little or none with respect to prevention services are available because these services are not billable by providers. Commissioner Kleinberg mentioned that she has seen some services available in elementary and middle schools through family-based grants and school-based grants. She also stated the First 5 has a visiting nurses program. In addition, she mentions that she has seen some programs available related to health, and how they would speak with people in the community. Commissioner Sorkin adds that there is Early Start Head Start programs and Children's Hospital was instrumental with launching Reach Out and Read. Commissioner Pedersen shared that Regional Centers have Early Start Programs.

Commissioners were asked to discuss Early Intervention needs. Commissioner Kleinberg responded that transition services (i.e. detention/placement, children leaving home, limited psychological services, mental health screening); Commissioner Worthy-Clayton stated that necessary resources for Relative Caregivers; Commissioner Pedersen stated the need of in-home services; Commissioner Rudnick stated awareness training was a need; Commissioner Olivas stated drug prevention training; Commissioner Friedman and Sorkin stated that co-occurring services were a need; and Commissioner Curry addressed the need flexibility with Medi-Cal guidelines and the need for child care services.

The Commissioners were asked what keeps people from getting prevention and early intervention services. The fear, lack of access, limited ability to pay for services, lack of clear communication from professionals, an overall lack of information, lack of trust, negative identification of the problem (i.e. you have a problem, you are depressed, etc.), high turnover in staff which creates a lack of continuity, and language barriers were all identified as reason people not access services.

The following strategies were identified to help people get the services they need: user friendly material using simple/clear language, increased partnership with the private sector/community based organization, and the inclusion of families at all levels of the decision making process. Commissioner Friedman pointed out that the brochure on MHSA PEI is not user friendly and should be replaced.

The Commission was asked for their final thoughts. The importance of training for staff, monitoring of medication, age appropriate outreach and services, and sufficiently trained and competent staff were indicated.

CHAIR'S REPORT

The Chair informed the Commission of the following upcoming events:

- July 11th deadline to RSVP Celebration II scheduled for August 21, 2008 at Universal Studios
- August 7, 2008 All for the Love of Kids Fund Raiser sponsored by Supervisor Antonovich

LETTER AND BOARD MOTION

Commissioner Sorkin discussed recent Board motions of Supervisor Molina and Supervisor Antonovich and the proposed letter from the Commission. The Commissioners discussed the purpose and intent of the letter. Corrections and modifications were made to the proposed letter. Commissioner Curry stated that it is important for the Board of Supervisors to go beyond Board Motions to address the issue of integration and prevent children from dying. Commissioner Worthy-Clayton suggested including in the letter specific information stating not only to prevent the death of children, but to also use additional methods for advocating in places like the State and Washington D.C. Commissioner Friedman suggested that the Commissioners also go to their individual Board Office regarding this concern. Commissioner Curry spoke to the importance of letting the Board of Supervisors know that there is a need for additional action. Motion by Commissioner Friedman and a Second by Commissioner Trevino Powell to approve the letter in concept. Commission Chair stated that revisions to the letter will be reviewed by the Executive Committee for final approval and then sent to the Board.

PUBLIC COMMENTS

No Public Comments

MEETING ADJOURN